



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov

BIB DATA SHEET

CONFIRMATION NO. 1026

SERIAL NUMBER	FILING or 371(c) DATE 06/09/2006 RULE	CLASS 424	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. LEXSAP35
---------------	--	--------------	------------------------	------------------------------------

APPLICANTS

Arturo Talavera Coronel, Ciudad Habana, CUBA; ^{oo}
 Gemma Lopez Ano, Ciudad Habana, CUBA; ^{oo}
 Jorge Luis Castano Fernandez, Ciudad Habana, CUBA; ^{oo}
 Evangelina Urribarri Hernandez, Ciuda Habana, CUBA; ^{oo}
 Yadira Navarro Pino, Ciuda Habana, CUBA; ^{oo}
 Hilda Maria Garcia Sanchez, Ciuda Habana, CUBA; ^{oo}
 Tania Balmaseda Perez, Ciuda Habana, CUBA; ^{oo}
 Barbara Cedre Marrero, Ciuda Habana, CUBA; ^{oo}
 Luis Garcia Imia, Ciuda Habana, CUBA; ^{oo}
 Jose Luis Perez Quinoy, Ciuda Habana, CUBA; ^{oo}
 Caridad Torres Suarez, Ciuda Habana, CUBA; ^{oo}

**** CONTINUING DATA *******

This application is a 371 of PCT/CU04/00005 03/19/2004 ^{oo}

**** FOREIGN APPLICATIONS *******

CUBA 2003-0061 03/20/2003 ^{oo}

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

07/22/2006

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and	/OLUWATOSIN A OGUNBIYI/ _____ Acknowledged _____	Initials	Met after Allowance OO	CUBA	4	26	2
	Examiner's Signature						

ADDRESS

LACKENBACH SIEGEL, LLP
 LACKENBACH SIEGEL BUILDING
 1 CHASE ROAD
 SCARSDALE, NY 10583
 UNITED STATES

TITLE

Inactivated vibrio cholerae vaccine in tablet form

FILING FEE RECEIVED 1330	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit